

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

ADDRESS (number and street) ▼

26220 ENTERPRISE COURT

☐ Check if different than previously reported. (ACC)

LAKE FOREST

CA

92630

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00240218

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer RAOUL SMYTH

Signature of Treasurer

RAOUL SMYTH

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 01 2012 To: M M / D D / Y Y Y Y Y Y
03 31 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		119138.65
(b) Cash on Hand at Beginning of Reporting Period.....	123663.65	
(c) Total Receipts (from Line 19)	3955.00	11980.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	127618.65	131118.65
7. Total Disbursements (from Line 31)	70.00	3570.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	127548.65	127548.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2012

To:

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1915.00

2835.00

(ii) Unitemized

2040.00

9145.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

3955.00

11980.00

(b) Political Party Committees

0

0

(c) Other Political Committees

(such as PACs).....

0

0

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

3955.00

11980.00

12. Transfers From Affiliated/Other

Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0

0

(b) Levin Funds (from Schedule H5)

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

3955.00

11980.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

3955.00

11980.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	3500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	70.00	70.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	70.00	70.00
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	70.00	3570.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70.00	3570.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	3955.00	11980.00
34. Total Contribution Refunds (from Line 28(d))	70.00	70.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3885.00	11910.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0	0

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Robert Allen

Mailing Address 7893 S Argonne Ct

City

Centennial

State

CO

Zip Code

80016-1803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

EVP, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16046

Amount of Each Receipt this Period

200.00

Payroll Deduction

(\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Doreen R Bellucci

Mailing Address 2 Brigmore Aisle

City

Irvine

State

CA

Zip Code

92603-5720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP, Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P15976

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mark A Centolella

Mailing Address 8304 Codys Cors

City

Cicero

State

NY

Zip Code

13039-7921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P15980

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Kirby Combs

Mailing Address 320 Urbano Dr

City State Zip Code
San Francisco CA 94127-2869

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP National Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P15981

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kenneth A. Common

Mailing Address 1238 N Raymond Ave

City State Zip Code
Fullerton CA 92831-2048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Real Estate Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P16044

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Lisa M Getson

Mailing Address 24806 Oxford Dr

City State Zip Code
Laguna Niguel CA 92677-8870

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Exec VP Govt Rel/Invst Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P15985

Amount of Each Receipt this Period

150.00

Payroll Deduction

(\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Daniel E. Greenleaf

Mailing Address 4550 E Perry Pkwy

City State Zip Code
 Greenwood Village CO 80121-2199

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P16056

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dwayne A Hargis

Mailing Address 926 Ironwood Trl

City State Zip Code
 Greenwood IN 46143-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Area VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P15988

Amount of Each Receipt this Period

90.00

Payroll Deduction

(\$45.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Paul L Heuvel

Mailing Address 1513 Via Tulipan

City State Zip Code
 San Clemente CA 92673-3714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP Customer Care Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P15989

Amount of Each Receipt this Period

40.00

Payroll Deduction

(\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Robert S Holcombe

Mailing Address 38 Oakbrook

City

Coto de Caza

State

CA

Zip Code

92679-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Exec VP General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P15990

Amount of Each Receipt this Period

150.00

Payroll Deduction

(\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Christopher A. Karkenny

Mailing Address 732 The Strand

City

Hermosa Beach

State

CA

Zip Code

90254-4457

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

EVP, CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16048

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael L McKinney

Mailing Address 209 Nunzia Ct

City

Roseville

State

CA

Zip Code

95661-3979

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P15993

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Dean W. Milligan

Mailing Address 521 Andalusian Rd

City

Schwenksville

State

PA

Zip Code

19473-1882

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P16035

Amount of Each Receipt this Period

120.00

Payroll Deduction

(\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dena R Parker

Mailing Address 18 San Marco

City

Aliso Viejo

State

CA

Zip Code

92656-5226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Sr. VP, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P15995

Amount of Each Receipt this Period

150.00

Payroll Deduction

(\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Norman C. Payson

Mailing Address 453 Beech Hill Rd

City

Hopkinton

State

NH

Zip Code

03229-2674

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 23 / 2012

Transaction ID : 318-P16050

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 13

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Steven E. Pharr

Mailing Address 2408 Silverstone Ln

City

McKinney

State

TX

Zip Code

75070-5520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coram, Inc.

Occupation

RVP, Infusion Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16051

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Peter C Racine

Mailing Address 32 Las Pisadas

City

Rancho Santa Margarita

State

CA

Zip Code

92688-4130

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

VP, Supply Chain Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2012

Transaction ID : 316-P15865

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Tami Salley

Mailing Address 304 Oak Ridge Dr

City

Venetia

State

PA

Zip Code

15367-1160

FEC ID number of contributing
federal political committee.

C

Name of Employer

Apria Healthcare

Occupation

Division VP Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P15999

Amount of Each Receipt this Period

120.00

Payroll Deduction

(\$60.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

255.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 13

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

Full Name (Last, First, Middle Initial)

A. Raoul Smyth

Mailing Address 11 Ensueno E

City State Zip Code
Irvine CA 92620-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Apria Healthcare VP, Associate General Counsel

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16001

Amount of Each Receipt this Period

35.00

Payroll Deduction

(\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Andrew Cameron Thompson

Mailing Address 20 Westchester Ct

City State Zip Code
Coto de Caza CA 92679-4956

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Apria Healthcare Exec VP Ops

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16004

Amount of Each Receipt this Period

150.00

Payroll Deduction

(\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Deanna P Thompson

Mailing Address 177 Montalvo Rd

City State Zip Code
Redwood City CA 94062-3820

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Apria Healthcare Division VP Sales

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 318-P16005

Amount of Each Receipt this Period

100.00

Payroll Deduction

(\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

1915.00

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

APRIA HEALTHCARE INC POLITICAL ACTION COMMITTEE (FKA)HOMEDCO INC PAC

70.00

State: District:

State: District:

State: District:

A horizontal bar with a value of 70.00. The bar is light gray with a darker gray outline. It has a series of small, evenly spaced rectangular protrusions along its top and bottom edges. The value "70.00" is displayed in black text at the right end of the bar.